

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	E42	12/13/93
TYPIST	343	12/15/93
VERIFIER	V424	12/26/93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final	
Original	4-12-94
1	
2	✓
3	
4	
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6	
7	✓
8	
9	✓
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14	✓
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17	✓
18	✓
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22	✓
23	✓
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SYMBOLS

✓	Rejected
—	Allowed
— (through number)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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